| - PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  Application of Docket Number  Of 1097269   |  |   |                |                               |                          |                  |       |                     |                        |          |                     |                        |   |
|--|--|---|----------------|-------------------------------|--------------------------|------------------|-------|---------------------|------------------------|----------|---------------------|------------------------|---|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                |                               |                          |                  |       | SMALL ENTITY TYPE   |                        |          | OTHER THAN          |                        |   |
| TC   | TAL CLAIMS                                     |   | 18             |                               |                          |                  |       | RATE                | FEE                    |          | RATE                | FEE                    |   |
| FOR  |  |   | NUMBER FILED   |                               | NUMBER EXTRA             |                  |       | BASIC FEE           | 355.00                 | OR       | BASIC FEE           | 710.00                 |   |
| то   | TAL CHARGEA                                    | BLE CLAIMS                                | /& minus 20=   |                               | •                        |                  |       | X\$ 9=              |                        | OR       | X\$18=              |                        |   |
| IND  | EPENDENT CL                                    | AIMS                                      | / minus 3 ≠    |                               |                          |                  |       | X40=                |                        | OR       | X80=                |                        |   |
| MU   | LTIPLE OEPEN                                   | IDENT CLAIM P                             | RESENT         |                               |                          |                  |       | +135=               |                        |          | +270=               |                        |   |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |                |                               |                          |                  |       | TOTAL               | 3560                   | OR<br>OR | TOTAL               | _                      |   |
| CLAIMS AS AMENDED - PART II OTHER  |  |   |                |                               |                          |                  |       |                     |                        |          |                     | THAN                   |   |
| (Column 1) (Column 2) (Column 3)   |  |   |                |                               |                          |                  |       | SMALL               | ENTITY                 | OR       | SMALL               | ENTITY                 |   |
| NTA  | ,  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY             | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |   |
| AMENDMENT A  | Total  | . 18                                      | Minus          | /                             | W                        | =                | 1     | X\$ 9=              |                        | OR       | X\$18=              |                        |   |
|  | Independent                                    | . /                                       | Minus          | ***                           | 3                        | =                |       | X40=                |                        | OR       | X80=                |                        | · |
| ٢  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                               |                          |                  |       |                     |                        |          |                     |                        |   |
|  |  |   |                |                               |                          |                  |       | +135=               |                        | OR       | +270=               |                        |   |
|  |  |   |                |                               |                          |                  |       | TOTAL<br>ADDIT, FEE | <u> </u>               | OR       | ADDIT. FEE          |                        |   |
| _  | <del>,</del>                                   | (Column 1)                                |                | (Colui                        |                          | (Column 3)       | 1     |                     |                        |          |                     |                        |   |
| NA B   | 2423/15  | REMAINING<br>AFTER<br>AMENDME:            | •              | NUM<br>PREVK<br>PAID          | BER<br>OUSLY             | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE | OR.      | RATE                | ADDI-<br>TIONAL<br>FEE |   |
| AMENDMENT  | Total  | . 19                                      | Minus          | /                             | $\overline{\mathcal{V}}$ | =                |       | X\$ 9=              |                        |          | X\$18=              |                        |   |
| MEN  | Independent                                    | . /                                       | Minus          | ••• ,                         | 3                        | - /              |       | X40=                |                        |          | X80=                |                        |   |
| ۷  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                               |                          |                  |       |                     |                        | OR       |                     |                        |   |
|  |  |   |                |                               |                          |                  |       | +135=               |                        | OR       | +270=               |                        |   |
|  |  |   |                |                               |                          |                  |       |                     |                        | OR       | TOTAL<br>ADDIT. FEE |                        |   |
| (Column 1) (Column 2) (Column 3)   |  |   |                |                               |                          |                  |       |                     |                        |          |                     |                        | i |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ,              | NUM<br>PREVIO<br>PAID         | BER<br>DUSLY             | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |   |
|  | Total  | •   | Minus          | ••                            |                          | _                | X\$ 9 | X\$ 9=              |                        | OR X     | X\$18=              |                        |   |
|  | Independent                                    |   | Minus          | •••                           |                          | =                |       | X40=                |                        |          | X80=                |                        |   |
| ₹  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                               |                          |                  |       | .140=               |                        | OR       | ∧6U=                |                        |   |
|  |  |   |                |                               |                          |                  |       |                     |                        | OR       | +270=               |                        |   |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT, FEE  OR  ADDIT, FEE |  |   |                |                               |                          |                  |       |                     |                        |          |                     |                        | İ |
| •••  | If the "Highest Nu                             | mber Previously Pa<br>ober Previously Pa  | aid For IN THI | S SPACE                       | s loss tha               | n 3, enter "3."  |       |                     | propriate bo           |          |                     | _                      |   |